

2673

PATENT
450100-03779



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Hiroaki ENDO et al.

Serial No. : 10/074,414

Filed : February 12, 2002

For : LIQUID CRYSTAL PROJECTOR APPARATUS AND
DRIVING METHOD FOR LIQUID CRYSTAL PROJECTOR
APPARATUS

Examiner : Prabodh M. DHARIA

Art Unit : 2673

RECEIVED

OCT 18 2004

Technology Center 2600

745 Fifth Avenue
New York, New York 10151
Tel. (212) 588-0800

I hereby certify that this correspondence is being deposited with
the United States Postal Service as first class mail in an envelope
addressed to: Mail Stop Amendment, Commissioner for
Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on
October 5, 2004.

Bruno Polito, Reg. No. 38,580

Name of Applicant, Assignee or Registered Representative

Signature

October 5, 2004

Date of Signature

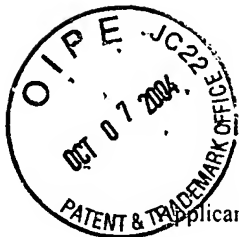
AMENDMENT

Mail Stop **Amendment**
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action dated July 12, 2004, please amend the above-
identified application as follows:

00195266



PATENT
450100-03779

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Hiroaki ENDO et al.
Serial No. : 10/074,414
Filed : February 12, 2002
For : LIQUID CRYSTAL PROJECTOR APPARATUS AND DRIVING
METHOD FOR LIQUID CRYSTAL PROJECTOR APPARATUS
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Technology Center 2600

745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	10	Minus	20	0 x	\$18 (9)	= \$0.00
Independent claims	2	Minus	3	0 x	\$86 (43)	= \$0.00
Total additional fee for this amendment						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$290(145) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the ____ month following the expiration of the term originally set therefor. This is a petition to request a one-month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$____ is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.
- ☐ Charge \$____ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on October 5, 2004

Bruno Polito, Reg. No. 38,580

Name of Applicant, Assignee or Registered Representative

Signature

October 5, 2004

Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicant(s)

By:

Bruno Polito

Reg. No. 38,580

Tel: 212-588-0800